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DLN: 93493314020712

Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No 1545-0047

Open to Public

C Name of organization CTIA - THE WIRELESS ASSOCIATION Doing Business As	D Employ	vor identification number
Doing Business As		yer identification number
		47628
_	E Telepho	one number
Number and street (or P O box if mail is not delivered to street address) Room/suite	(202)	736-3200
1400 16TH STREET NW	G Gross re	eceipts \$ 82,554,340
City or town, state or country, and ZIP + 4 WASHINGTON, DC 20036		
		_
F Name and address of principal officer STEVE LARGENT	H(a) Is this a group	return for Yes V No
1400 16TH STREET NW	diffiaces	, 105 , 110
WASHINGTON,DC 20036	H(b) Are all affiliates	included?
US		a list (see instructions)
	H(c) Group exempti	on number ►
1		
on Corporation Trust Association Other	L Year of formation 198	M State of legal domicile D
mmary		
REPRESENTS WIRELESS CARRIERS, THEIR SUPPLIERS, & WIRELESS D		
this box দ if the organization discontinued its operations or disposed of	more than 25% of its	net assets
er of voting members of the governing body (Part VI, line 1a) $\cdot\cdot\cdot$. \cdot		3 3
er of independent voting members of the governing body (Part VI, line 1b)	[4 3
number of individuals employed in calendar year 2011 (Part V , line 2a) $$.		5 10
number of volunteers (estimate if necessary)		6
unrelated business revenue from Part VIII, column (C), line 12		7a 225,19
nrelated business taxable income from Form 990-T, line 34		7b -412,52
	Prior Year	Current Year
tributions and grants (Part VIII, line 1h)	9,568,9	10,801,12
gram service revenue (Part VIII, line 2g)	45,862,7	747 51,436,37
estment income (Part VIII, column (A), lines 3, 4, and 7d)	2,359,7	769 3,782,49!
	102,0	70 -132,17
al revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		
	2,666,9	
		0 (
	16.367.3	358 17,743,444
		0 0
- · · · · · · · · · · · · · · · · · · ·	32 410 1	29.720.02
enue less expenses Subtract line 18 from line 12		nt .
	Year	End of Year
al assets (Part X, line 16)	98,119,2	98,371,692
al liabilities (Part X, line 26)	14,065,5	10,896,035
assets or fund balances Subtract line 21 from line 20	84,053,7	711 87,475,657
gnature Block		
	1400 16TH STREET NW WASHINGTON, DC 20036 US	STEVE LARGENT 1400 L6TH STREET NW WASHINGTON,DC 20036 WW CTIA ORG on

Forn	1990 (2011)				Page 2
Par		nt of Program Service nedule O contains a respon	e Accomplishments use to any question in this Part	III	
1	Briefly describe th	e organization's mission			
THE SUP ON	WIRELESS COMMU PLIERS, AS WELL AS	NICATIONS INDUSTRY S PROVIDERS AND MAN ORE THE EXECUTIVE BR	NTERNATIONAL NONPROFIT MEMBERSHIP IN THE ASSOC UFACTURERS OF WIRELESS I ANCH, THE FEDERAL COMMU	CIATION INCLUDES WIRELE DATA SERVICES AND PROD	ESS CARRIERS AND THEIR DUCTS CTIA ADVOCATES
2			t program services during the y		┌ Yes ┌ No
	If "Yes," describe t	hese new services on Sch	edule O		
3	services?		ke significant changes in how it	conducts, any program	┌ Yes ┌ No
	If "Yes," describe t	hese changes on Schedule	: O		
4	expenses Section	501(c)(3) and 501(c)(4) of	accomplishments for each of its organizations and section 4947 oenses, and revenue, if any, for	(a)(1) trusts are required to i	eport the amount of
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)
	COMMISSION AND OT OTHER ISSUES AFFEC	HER FEDERAL ADMINISTRATIVE	MUNICATIONS INDUSTRY BEFORE CON AGENCIES, AND STATE ADMINISTRATI OCIATION ALSO REPRESENTS THE WIF F WIRELESS INTERESTS	VE AGÉNCIES ON MATTERS OF PUBL	IC POLICY, PRODUCT USAGE, AND
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)
		ONSORS TWO ANNUAL CONVENT DE SHOWS IN THE WIRELESS IN	IONS AND EXPOSITIONS ONE OF THO DUSTRY	SE MEETINGS, CTIA WIRELESS, IS C	ONE OF THE LARGEST AND MOST
4c	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)
	MEMBERS OF THAT IN VARIOUS PARTIES WIS CSCS ARE AVAILABLE MARKETING AGENCIE ACTIVITIES AS TELEVI INVOLVING THE USE CINDUSTRY ON MARCI IS TO CREATE A CENT CONSUMERS, INSTEAL	IDUSTRY IN THAT CAPACITY, THE SHING TO USE THOSE CODES, A FOR ASSIGNMENT CSCS ARE ASSOCIATED OTHER CONTENT PROVING INFORMATION FOR POLLING, INFORMATION FOR COMMON SHORT CODED OF NEGOTIATION FOR RELIZED COMMON SHORT CODED OF NEGOTIATION FOR REGOTIATION WITH AND CO	T CODES ("CSCS") FOR THE WIRELES HE ASSOCIATION ADMINISTERS A CATA ND MAINTAINS A REGISTRY OF WHICH SIGNED TO ADVERTISERS AND ADVER DERS THAT WISH TO RECEIVE TEXT M RMATION REQUESTS, DIRECT RESPOI OLLECTIVE REVENUES OF APPROXIMA DEMMED A WHOLLY OWNED SUBSIDIAR' E ("CSC") REGISTRY FOR LATIN AMER OORDINATING THIS PROCESS AMONG FIED CAMPAIGN ACROSS ALL OF LATIN	ALOG OF CSCS, ASSIGNS CSCS CON IT CSCS HAVE BEEN ASSIGNED AND IT ITSING AGENCIES, TELEVISION AND ITSING AGENCIES, TELEVISION AND ITSE MARKETING PROMOTIONS AND ITELY \$2 3 BILLION FOR MEMBERS OF A LLC THE PRIMARY ICA THIS INITIATIVE WILL GREATLY ICA THIS INITIATIVE WILL GREATLY ITELY BULL GREATLY ICA THIS INITIATIVE WILL GREATLY ITELY BULL GREATLY ICA THIS INITIATIVE WILL GREATLY ITELY BULL GREATLY IN ITELY BULL GREATLY IN ITELY BULL GREATLY BULL BULL BULL BULL BULL BULL BULL BU	TAINED IN THE CATALOG TO FOR WHAT PURPOSES, AND WHICH D RADIO PROGRAMS, DIRECT BERS TO FACILITATE SUCH WIRELESS ADVERTISING ACTIVITIES F THE WIRELESS COMMUNICATIONS PURPOSE FOR THIS ORGANIZATION ' BENEFIT BUSINESSES AND
	(Code) (Expenses \$	0 including grants of \$) (Revenue \$)
	CERTIFICATIONS - SE	, , ,	5cidding grants of \$) (Nevellae 4	,
4d	Other program se	rvices (Describe in Sched	ule O)		
	(Expenses \$	•	ding grants of \$) (Revenue \$)
4e	Total program ser	vice expenses►\$	0		

CHECKIIST OF REGULE CO SCHEDULE	art IV	Checklist of	Required	Schedule
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	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		No
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		Νo
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If</i> "Yes," complete Schedule D, Part V	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? <i>If "Yes," complete Schedule D, Part VI.</i>	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If "Yes," complete Schedule F, Part II and IV</i>	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," complete Schedule G, Part I	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. All Form 990 filers that operated one or more hospitals must attach audited financial statements	20h		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizat the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	ions in 21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United St on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	ates 22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24 complete Schedule K. If "No," go to line 25			No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	· 24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	· · 24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction a disqualified person during the year? If "Yes," complete Schedule L, Part I	n with 25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a pri year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-E. "Yes," complete Schedule L, Part I			
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employ disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	ee, or 26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantibutor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	tantial 27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, P instructions for applicable filing thresholds, conditions, and exceptions)	art IV		
a	A current or former officer, director, trustee, or key employee? <i>If</i> " <i>Yes,"</i> complete Schedule L, Part <i>IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV .	f) was 28 c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," comp. Schedule N, Part II	lete 32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulation sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	ns 📆 33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III and V, line 1	7, IV, 34	Yes	
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13) [?] 35a	Yes	
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within t meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	he 35b	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable relationganization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	:ed 36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	5 37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 990	(2011)

•	·
Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check it Schedule O contains a response to any question in this Part V		• 1	
			Yes	No
.a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	1a 153			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this			
b	return			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
a	Did the organization have unrelated business gross income of \$1,000 or more during the	3a	Yes	
ь	year?	3b	Yes	
a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account or securities	4a		No
ь	account)?			NO
	If "Yes," enter the name of the foreign country See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
а	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
а	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
ı	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0 a	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12			
	facilities			
	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other			
	sources against amounts due or received from them)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
D	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state	13a		
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the aggregate amount of reserves on hand 13c			
4a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Se	ection A. Governing Body and Management							
			Yes	No				
4.	Enterphysical Control of Control of the Control of							
1a	Enter the number of voting members of the governing body at the end of the tax year							
b	Enter the number of voting members included in line 1a, above, who are independent							
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No				
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No				
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No				
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No				
6	Did the organization have members or stockholders?	6	Yes					
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes					
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No				
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following							
а	The governing body?	8a	Yes					
b								
9	9		No					
	ection B. Policies (This Section B requests information about policies not required by the Internal							
Re	evenue Code.)							
			Yes	No				
	Did the organization have local chapters, branches, or affiliates?	10a		No				
b	b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?							
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes					
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990							
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes					
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes					
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes					
13	Did the organization have a written whistleblower policy?	13	Yes					
14	14	Yes						
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?							
а	The organization's CEO, Executive Director, or top management official	15a	Yes					
b	15b	Yes						
	If "Yes," to line 15a or 15b, describe the process in Schedule O (see instructions)							
16a	16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?							
b								
	participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b						
Se	ection C. Disclosure							
17								
			_	_				

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply

Own website Another's website Vpon request

- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization MICHAEL DONNELLAN
 1400 16TH STREET NW
 WASHINGTON, DC 20036
 (202) 736-3200

Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0 in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- ◆ List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(a) Name and Title A verage hours par week (describe hours for related organizations in Schedule O) See Additional Data Table (b) Position (do not check more than one box, unless person is both an officer and a director/trustee) (c) Position (do not check more than one box, unless person is both an officer and a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations is not should be a director/trustee) (describe hours for related organizations) (describe hours for related organizations) (describe hours for the director/trustee) (describe hours for related organizations) (describe hours for the director/trustee) (describe hours for related organizations) (describe hours for the director/trustee) (de	Check this box if neither the organiz	•	lated o	rganı	ızatı	ons	compe	ensat	ed any current or fo	ormer officer, direct	tor, or trustee
for related organizations in Schedule Officer Schedule O) organizations	(A)	(B) Average hours per week	Positi more unles an	on (de than s per offic	C) o no n one son er ar	t che e bo: is bo nd a	eck x, oth		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
See Additional Data Table		for related organizations in Schedule	Individual trustee or director	Institutional Trustee	Officei	Ke) emplojee	Highest compensated employee	Former		MISC)	I
	See Additional Data Table										

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

hours more than one box, compensation co per unless person is both from the fr week an officer and a organization (W- (describe director/trustee) 2/1099-MISC) (V										from related organizations (W- 2/1099-	Reportable compensation from related organizations (W- 2/1099-		
	hours for related organizations in Schedule O) Highest compensated Wisc) Former Former Former Former Former Former Former Former Officer Officer												ed ations
See Additional Data Table													
1b Sub-Total													
d Total (add lines 1b and 1c) .							<u>-</u>		6,468,316		0		1,230,252
2 Total number of individuals (incl \$100,000 of reportable compen					ted	above) who	receive	ed more tha	an			
												Yes	No
3 Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sch					ey e •	mploy •	ee, c	or highes	t compens	ated employee	3		No
4 For any individual listed on line : organization and related organization											4	Yes	
5 Did any person listed on line 1a										or individual for		163	
services rendered to the organiz	ation? <i>If "Yes,"</i>	complet	e Sche	edule	e J fo	or suct	h per	son .		•	5		No
Section B. Independent Con													
1 Complete this table for your five \$100,000 of compensation from or within the organization's tax y	the organizatio												
(A) Name and business address (B) Description of services									(C Comper				
WIRELESS MEDIA CONSULTING INC 12700 FAIR LAKES CIRCLE STE 160 FAIRFAX, VA 22033									CONSULTAN	TS		1	.,703,546
WILEY REIN LLP 1776 K STREET NW WASHINGTON, DC 20006									CONSULTAN	TS		1	,006,069
WILKINSON BARKER KNAUER LLP 2300 N STREET NW WASHINGTON, DC 20037									CONSULTAN	TS			839,027
FREEMAN 600 WEST CHICAGO AVENUE CHICAGO, IL 60654									EXPOSITION	MGMT			711,019
GMMB 1010 WISCONSIN AVENUE NW WASHINGTON, DC 20007									ADVERTISEM	1ENT AGENCY		14	,010,775

Form 99			-f Davidson					Page 9
Part		Statement o	or Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
まま	1a	Federated cam	paigns 1a					
亞吉	b	Membership du	es 1b	10,801,125				
e, g	c	Fundraising eve	ents 1c					
Æ Æ	d	Related organiz	zations 1d					
<u>يَّ (</u>	e	Government grants	s (contributions) 1e					
돌	f		ons, gifts, grants, and 1f					
ž ž	g	similar amounts no	ot included above ibutions included in					
받	9	lines 1a-1f \$ _						
Contributions, gifts, grants and other similar amounts	h		s 1a-1f	▶	10,801,125			
				Business Code				
Ĭ	2a	ANNUAL CONVENT	ION	900099	18,489,412	18,364,729	124,683	
25	ь	CERTIFICATION		515100	6,466,750	6,466,750		
ъ. П	c	CTIA ORG		541800	24,552		24,552	
ž	d	CSC PROGRAM		517000	26,455,661	26,419,586	36,075	
<u>%</u>	e				,	,,		
<u></u>	f	All other progra	am service revenue					
Program Serwce Revenue		, -						
	g		s 2a – 2f		51,436,375			
	3		ome (including dividend	· · · · · · · · · · · · · · · · · · ·	2,327,372		39,884	2,287,488
	4		ar amounts) stment of tax-exempt bond		0		33,001	2,207,100
	5			· · · · · · · · · · · · · · · · · · ·	0			
		Royalties 1	(ı) Real	(II) Personal				
	6a	Gross rents	(1) 110 21	(,				
	ь	Less rental						
	_c	expenses Rental income						
		or (loss)		I				
	d	Net rental incol	me or (loss)	(II) Other				
	7a	Gross amount from sales of assets other	(1) Securities 18,121,645	(II) Other				
	ь	than inventory Less cost or other basis and	16,666,039	483				
	_c	sales expenses Gaın or (loss)	1,455,606	-483				
	d	Net gain or (los	(ss)		1,455,123			1,455,123
Other Revenue	8a	Gross income f events (not inc \$	luding s reported on line 1c)					
æ		,	а					
<u> i</u>	b	Less direct ex	penses b					
ŏ	С		loss) from fundraising) ا	events 🟲	0			
	9a	Gross income f See Part IV, lin	rom gaming activities ne 19 a					
	b		penses b					
	C		loss) from gamıng actı) ا	vities	0			
	10a	Gross sales of returns and allo						
	b	Less cost of g	oods sold b					
	С		ا loss) from sales of ۱nve)	entory ►				
		Miscellaneous	s Revenue	Business Code				
	11a	MANAGEMENT	Γ FEES	900099	75,000	75,000		
	ь	PRODUCT SAL		900099	16,368	16,368		
	c	OTHER NET IN		900099	-223,545	-223,545		
		SUBSIDIARIE:						
	d	All other revenu						
	e	iotai. Add lines	s 11a-11d		-132,177			
	12	Total revenue.	See Instructions .	▶↑	65,887,818	51,118,888	225,194	3,742,611
	1			L	03,007,010	31,110,000	<u>, , , , , , , , , , , , , , , , , , , </u>	Form 990 (2011)

Part IX Statement of Functional Expenses

SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX (B) (C) (D) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 2,579,447 Grants and other assistance to individuals in the United States See Part IV, line 22 0 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members n 5 Compensation of current officers, directors, trustees, and 8,638,727 key employees . . . Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . 0 7 Other salaries and wages 7,214,752 Pension plan contributions (include section 401(k) and section 403(b) employer contributions) 206,533 Other employee benefits 984,172 699,260 10 Fees for services (non-employees) 11 Management 103,066 Legal 149,719 7,565,193 Lobbying Professional fundraising See Part IV, line 17 . . 0 Investment management fees 91,135 1,064,373 g Advertising and promotion . . . Λ 12 Office expenses 13 443,360 14 Information technology 245,653 15 Royalties . . 0 16 1,513,166 590,493 17 Payments of travel or entertainment expenses for any federal, 18 state, or local public officials 24,157 19 Conferences, conventions, and meetings 5,265,456 0 20 0 21 Payments to affiliates 22 Depreciation, depletion, and amortization 1,792,344 23 383,837 Other expenses Itemize expenses not covered above (List 24 miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) PUBLIC POLICY 17,047,216 CREDIT CARD/BANK FEES 346,842 **DUES & SUBSCRIPTIONS** 183,250 CSC MONITORING 1,703,546 d е All other expenses 207,225 25 Total functional expenses. Add lines 1 through 24f 59,042,922 0 Joint costs. Check here ► 🗀 If following

Part X **Balance Sheet** (A) (B) Beginning of year End of year 183,683 113,375 1 1 25,868,340 24.576.498 2 2 3 0 3 0 3.737.379 3.383.357 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 0 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 0 6 0 7 0 0 8 9 1,439,288 9 1,630,610 Prepaid expenses and deferred charges 10a 4,448,663 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10b 3,330,826 b Less accumulated depreciation 1,222,687 10c 1,117,837 50,980,463 11 53,622,896 11 14,686,233 13,866,543 12 12 Investments—other securities See Part IV, line 11 13 13 0 Investments—program-related See Part IV, line 11 . . 0 14 0 14 1,173 15 60,576 15 98,119,246 98,371,692 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 4,156,523 17 4,431,844 17 Accounts payable and accrued expenses . 18 18 19 7,547,901 19 4,554,441 20 0 20 Ω 0 21 21 0 Escrow or custodial account liability Complete Part IV of Schedule D . . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 0 22 0 0 23 Secured mortgages and notes payable to unrelated third parties . . . 23 0 24 Unsecured notes and loans payable to unrelated third parties 24 0 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 2,361,111 25 1,909,750 D 26 14,065,535 26 10,896,035 **Total liabilities.** Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 84,053,711 27 87,475,657 Unrestricted net assets 0 28 0 28 Temporarily restricted net assets Fund 29 0 29 0 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶

and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances 84.053.711 33 87.475.657 34 Total liabilities and net assets/fund balances 98.119.246 98.371.692

Pai	Check if Schedule O contains a response to any question in this Part XI	•		. 🔽	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		65.8	387,81
2	Total expenses (must equal Part IX, column (A), line 25)	2			042,92
3	Revenue less expenses Subtract line 2 from line 1	3		6,8	344,89
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		84,0	053,71
5	Other changes in net assets or fund balances (explain in Schedule O)	5		-3,4	122,95
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		87,4	175,65
Par	TEXII Financial Statements and Reporting Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990			Yes	No
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain is Schedule O		2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis		l		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?		За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

Additional Data

Software ID: Software Version:

EIN: 52-1347628

Name: CTIA - THE WIRELESS ASSOCIATION

Form 990, Special Condition Description:

Special Condition Description Form 990, Part III - 4 Program Service Accomplishments (See the Instructions) 4d. Other program services (Code) (Expenses \$ 0 including grants of \$) (Revenue \$) CERTIFICATIONS - SEE SCHEDULE O

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
STEVE LARGENT PRESIDENT/CEO	36 0	×		х				2,305,729	0	393,049
DAN HESSE CHAIRMAN	1 0	Х		х				0	0	0
RALPH DE LA VEGA CHAIRMAN EMERITUS	1 0	Х		х				0	0	0
PATRICK RIORDAN VICE CHAIRMAN	1 0	Х		х				0	0	0
BRET COMOLLI TREASURER	1 0	Х		х				0	0	0
MARY DILLON SECRETARY	1 0	Х		х				0	0	0
JIM BALSILLIE DIRECTOR	1 0	Х						0	0	0
LEN BARLIK DIRECTOR	1 0	х						0	0	0
MARTY BEARD DIRECTOR (THROUGH 7/2011)	1 0	Х						0	0	0
MATT BROSS DIRECTOR	1 0	Х						0	0	0
PHILIP CHRISTOPHER DIRECTOR	1 0	Х						0	0	0
R MARCELO CLAURE DIRECTOR	1 0	Х						0	0	0
ROBERT DAWSON DIRECTOR (THROUGH 8/2011)	1 0	х						0	0	0
G EDWARD EVANS DIRECTOR	1 0	Х						0	0	0
MARTIN FICHTER DIRECTOR	1 0	Х						0	0	0
JEFF GORDON DIRECTOR (AS OF 7/2011)	1 0	х						0	0	0
TONY HOLCOMBE DIRECTOR (THROUGH 7/2011)	1 0	Х						0	0	0
DON HORSLEY DIRECTOR (AS OF 8/2011)	10	Х						0	0	0
PHILIP HUMM DIRECTOR	1 0	Х						0	0	0
S DOUGLAS HUTCHESON DIRECTOR	10	Х						0	0	0
JEFF HWANG DIRECTOR	10	Х						0	0	0
JOHNIE JOHNSON DIRECTOR	10	Х						0	0	0
PEGGY JOHNSON DIRECTOR	1 0	Х						0	0	0
GREG KLIMEK DIRECTOR	10	Х						0	0	0
ANDREW LEES DIRECTOR	10	x						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per		tion that a		/)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustae or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
DAN MEAD DIRECTOR	1 0	×						0	0	0
JEFF MILLER DIRECTOR (AS OF 7/2011)	1 0	х						0	0	0
BILL MORROW DIRECTOR (THROUGH 3/2011)	10	Х						0	0	0
MIKE MULICA DIRECTOR	1 0	Х						0	0	0
FRANK O'MARA DIRECTOR	1 0	Х						0	0	0
FJ POLLAK DIRECTOR	1 0	Х						0	0	0
ERIC PRATT	1 0	Х						0	0	0
DIRECTOR (AS OF 8/2011) ERIK PRUSCH DIRECTOR (AS OF 3/2011)	10	Х						0	0	0
ANGEL RUIZ DIRECTOR	1 0	Х						0	0	0
MARK SHOCKLEY DIRECTOR (THROUGH 7/2011)	1 0	Х						0	0	0
JOHN SIMS DIRECTOR (AS OF 7/2011)	1 0	Х						0	0	0
RONALD SMITH DIRECTOR	1 0	х						0	0	0
EY SNOWDEN DIRECTOR (THROUGH 8/2011)	1 0	х						0	0	0
DALE SOHN DIRECTOR	1 0	х						0	0	0
JOHN STANTON DIRECTOR (THROUGH 3/2011)	1 0	Х						0	0	0
MAURICE B TOSE DIRECTOR	1 0	Х						0	0	0
CHARLES TOWNSEND DIRECTOR	1 0	Х						0	0	0
ROBERT VRIJ DIRECTOR	1 0	Х						0	0	0
CHRIS WEBER DIRECTOR	1 0	Х						0	0	0
WIRT YERGER III DIRECTOR	1 0	Х						0	0	0
MICHAEL ALTSCHUL SVP & GEN COUNSEL	38 0				Х			620,030	0	117,479
BOBBY FRANKLIN EXECUTIVE VP	38 0				Х			563,588	0	109,840
ROCCO CARLITTI VP, FINANCE & ADMIN	40 0				Х			316,592	0	107,980
ROBERT MESIROW VP, OPERATIONS	40 0				Х			451,615	0	58,492
JOHN WALLS VP, PUBLIC AFFAIRS	320				Х			425,969	0	62,718

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours		(ition i that a		/)			(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
JOT CARPENTER VP, GOVT AFFAIRS	38 0					х		430,173	0	111,698
DAVID DIGGS VP, WIRELESS INT DEV	40 0					х		327,538	0	59,122
CHRIS GUTTMAN-MCCABE VP, REG AFFAIRS	400					х		423,333	0	109,594
DANE K SNOWDEN VP, EXT & ST AFFAIRS (THRU 8/5	40 0					Х		315,595	0	41,319
ROBERT ROCHE VP, RESEARCH	400					x		288,154	0	58,961

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493314020712

OMB No 1545-0047

Political Campaign and Lobbying Activities

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

Open to Public **Inspection**

72,000

If the organization answered "Yes," to Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- ◆ Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- ◆ Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," to Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- ◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization	
52-1347628	
Name of the organization CTIA - THE WIRELESS ASSOCIATION Employer identification number	

1	in opposition to candidates for public office in Part IV				
2	Political expenditures	•	\$ <u></u>		72,000
3	Volunteer hours		_		
Par	t I-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955	-	\$ <u></u>		
2	Enter the amount of any excise tax incurred by organization managers under section 4955	►	\$		
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			┌ Yes	┌ No
4a	Was a correction made?			┌ Yes	┌ No
b	If "Yes," describe in Part IV				

Part I-C Complete if the organization is exempt under section 501(c) except section 501(c)(3).

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year? 4
- Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter - 0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(1) DEMOCRATIC ATTORNEYS GENERAL ASSOCIATION	1580 LINCOLN ST DENVER, CO 80203	13-4220019	25,000	0
(2) REPUBLICAN STATE LEADERSHIP COMMITTEE	1800 DIAGONAL ROAD ALEXANDRIA, VA 22314	05-0532524	35,000	0
(3) DEMOCRATIC LEGISLATIVE CAMPAIGN	1401 K STREET NW WASHINGTON, DC 20005	52-1870839	12,000	0

f Grassroots lobbying expenditures

(The term "expenditures" means amounts paid or incurred.) Lia Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000 over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 over \$1,000,000 but not over \$1,000,000 \$1,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.)	ווטפ	edule C (F	01111 9 9 0 01 9 9 0 - EZ) 2 0 1 1					Page ∠
A Check If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member expenses, and share of excess lobbying expenditures) Check If the filing organization checked box A and "limited control" provisions apply Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures" means amounts paid or incurred.) Organization Total Incurred (The term "expenditures to influence a legislative body (direct lobbying)	Pa	rt II-A		n is exempt under	section 501(c)(3) and fi	iled Form 5768	(election
expenses, and share of excess lobbying expenditures) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Limits on Lobbying Expenditures (The term "expenditures to influence public opinion (grass roots lobbying) Lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b) Other exempt purpose expenditures Total obtaining purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 S1,000,000 but not over \$1,500,000 S1,000 but not over \$1,500,000 S1	١	Check		an affiliated group (and	lıst ın Part IV ea	ch affiliated gr	oup member's nam	e, address, EIN,
Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) Total lobbying expenditures to influence public opinion (grass roots lobbying) Total lobbying expenditures (add lines 1 aand 1b) Other exempt purpose expenditures (add lines 1 aand 1b) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line Le, column (a) or (b) is: If the amount on line Le, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Over \$1,000,000 but not over \$1,000,000 S10,000,000 Fig. Soon over \$1,000,000 Fig. Soon ov			expenses, and share of excess lob	bying expenditures)		_	•	
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Diver \$500,000 Diver \$500,000 Diver \$500,000 but not over \$1,000,000 Diver \$1,000,000 but not over \$1,000,0	3	Check	ıf the filing organization checked bo	ox A and "limited contro	ol" provisions app	ly	1	1
(The term "expenditures" means amounts paid or incurred.) Ital Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1225,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S1200,000 plus 10% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but			Limits on Lobbying	Expenditures			(a) Filing	(b) Affiliated
Total lobbying expenditures to influence public opinion (grass roots lobbying) b Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S175,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 S100,000 plus 15% of the excess over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 The lobbying nontaxable amount is: Not over \$500,000 Over \$1,000,000 Over \$1,000,00					l.)		Organization's Totals	Group Totals
b Total lobbying expenditures to influence a legislative body (direct lobbying) c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,7000,000 Over \$1,000,000 but not over \$1,7000,000 S225,000 plus 15% of the excess over \$1,000,000 Over \$1,7000,000 Over \$1,7000,000 F17,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$1,7000,000 F17,000,000 S1,000,000 F17,000,000 F17,000,		-			1 \		100013	1 ocars
c Total lobbying expenditures (add lines 1a and 1b) d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 In the excess over \$1,000,000 F1,000,000 F1,000,0				· -				
d O ther exempt purpose expenditures Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: The lobbying nontaxable amount is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000					ying)			
Total exempt purpose expenditures (add lines 1c and 1d) Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is:			,	b)				
f Lobbying nontaxable amount Enter the amount from the following table in both columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$17,000,000 but not over \$1,7000,000 Over \$17,000,000 but not over \$17,000,000 S225,000 plus 10% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 Over \$17,000,000 S225,000 plus 5% of the excess over \$1,000,000 Over \$17,000,000 Over \$17,000,000 S1,000,000 S1,000,0	d	Otherexe	empt purpose expenditures					
Columns If the amount on line 1e, column (a) or (b) is: Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$500,000 but not over \$1,500,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,000,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 Over \$1,500,000 S1,000,000	e	Total exe	mpt purpose expenditures (add lines 1	.c and 1d)				
Not over \$500,000 Over \$500,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,000,000 Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,7000,000 Over \$1,500,000 but not over \$1,000,000 Over \$1,500,000 but not over \$1,000,000 S225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 S1,000,000 Grassroots nontaxable amount (enter 25% of line 1f) Subtract line 1g from line 1a If zero or less, enter -0- Subtract line 1f from line 1c If zero or less, enter -0- If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount	f		nontaxable amount Enter the amount	from the following table	in both			
Over \$500,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000 Over \$1,000,000 but not over \$1,000,000 \$175,000 plus 10% of the excess over \$1,000,000 Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,000,00		If the an	ount on line 1e, column (a) or (b) is:	The lobbying nontax	able amount is:			
Over \$1,000,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Over \$1,500,000 but not over \$1,500,000 Section \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Not over \$5	500,000	20% of the amount on lii	ne 1e			
Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000 Over \$17,000,000 \$1,00		Over \$500,	000 but not over \$1,000,000	\$100,000 plus 15% of the	e excess over \$500,0	000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying celling amount		Over \$1,000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,00			e excess over \$1,000	,000		
g Grassroots nontaxable amount (enter 25% of line 1f) h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1ffrom line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount		Over \$1,50	0,000 but not over \$17,000,000	\$225,000 plus 5% of the	excess over \$1,500,	000		
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount		Over \$17,0	00,000	\$1,000,000				
h Subtract line 1g from line 1a If zero or less, enter -0- i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying ceiling amount								
i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount		Grassroo	ts nontaxable amount (enter 25% of li	ne 1f)				
i Subtract line 1f from line 1c If zero or less, enter -0- j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount	h	Subtract	line 1a from line 1a If zero or less. en	ter -0 -				
Jection 4911 tax for this year? 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying ceiling amount								
4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount					organization file	Form 4720 re	portina	
(Some organizations that made a section 501(h) election do not have to complete al columns below. See the instructions for lines 2a through 2f on page 4.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 Lobbying non-taxable amount							F - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	┌ Yes ┌ No
Calendar year (or fiscal year beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 2009 Lobbying non-taxable amount		(Sor	ne organizations that made a	section 501(h) el	ection do not	have to co		ne five
beginning in) (a) 2008 (b) 2009 (c) 2010 (d) 20 2a Lobbying non-taxable amount b Lobbying ceiling amount			Lobbying Exp	enditures During	4-Year Avera	ging Period	d	
b Lobbying ceiling amount				(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
	2a	Lobbyin	g non-taxable amount					
	b							
c Total lobbying expenditures	c	Total loi	obying expenditures					
d Grassroots non-taxable amount	d	Grassro	ots non-taxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))	e							

		. 4	
Part II-B	Complete if the or	ganization is exempt under section 501(c)(3) and has NOT filed Form 5768	;
	(election under se	ction 501(h)).	

(b)	
nt	
n	
No	
Νo	

Did the organization agree to carryover lobbying and political expenditures from the prior year? 3 | Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, line 3 is answered "Yes".

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
а	Current year	2a	
b	Carryover from last year	2b	
C	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	

_	rigging and all reported in section 555(c)(1)(r) notices of nondeductible section 152(c) dues
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and
	political expenditure next year?
5	Tayable amount of lobbying and political expenditures (see instructions)

T axable amount of lobbying and political expenditures (see instructions)

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1i Also, complete this part for any additional information

Identifier	Return Reference	Explanation
SCHEDULE C, PART I-A, LINE 2		CTIA GIVES TO THE FOLLOWING ORGANIZATIONS DEMOCRATIC ATTORNEYS GENERAL ASSOCIATION - \$25,000, REPUBLICAN STATE LEADERSHIP COMMITTEE - \$35,000, DEMOCRATIC LEGISLATIVE CAMPAIGN - \$12,000 THE TOTAL AMOUNT OF WHICH EQUALS \$72,000

4 5 DLN: 93493314020712

Employer identification number

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions.

Name of the organization CTIA - THE WIRELESS ASSOCIATION

Par	rt I Organizations Maintaining Donor	Advised Funds o	r Ot	her Similar F		347628 r Account	s. Comple	te if the
	organization answered "Yes" to Form	990, Part IV, line 6.	<u>. </u>				·	
	-	(a) Donor a	advis	ed funds	(1) Funds and	other accou	nts
	Total number at end of year				1			
	Aggregate contributions to (during year)							
	Aggregate grants from (during year) Aggregate value at end of year				+			
5	Did the organization inform all donors and donor a funds are the organization's property, subject to the				nor advis	ed	 ☐ Yes	
5	Did the organization inform all grantees, donors, a used only for charitable purposes and not for the beconferring impermissible private benefit	nd donor advisors in w	vriting	that grant fund			┌ Yes	┌ No
	t II Conservation Easements. Comple	te if the organizatio	n an	swered "Yes"	to Form	990, Part 1	IV, line 7.	
2	Purpose(s) of conservation easements held by the Preservation of land for public use (e g , recre Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a que easement on the last day of the tax year	ration or pleasure) 「「「「「「「「」」「「「」「「「」」「「「」」「「「」」「「」」「「」」「	Г Р Г Р	reservation of a reservation of a	certified	historic stru	,	a
	casement on the last day of the tax year					Held at th	e End of the	Year
а	Total number of conservation easements				2a			
b	Total acreage restricted by conservation easeme	nts			2b			
С	Number of conservation easements on a certified	historic structure inclu	uded	ın (a)	2c			
d	Number of conservation easements included in (c) acquired after 8/17/0	06		2d			
	Number of conservation easements modified, tran the taxable year Number of states where property subject to conse				ed by the	e organizatio	n during	
	Does the organization have a written policy regard enforcement of the conservation easements it hol	ding the periodic monit			ndling of	/ıolatıons, ar	nd Yes	┌ No
5	Staff and volunteer hours devoted to monitoring, ii	nspecting and enforcin	ng coi	nservation ease	ments du	rıng the year	<u> </u>	
7	A mount of expenses incurred in monitoring, inspe \$	cting, and enforcing co	onser	vation easemen	ts during	the year		
	Does each conservation easement reported on lin $170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	e 2(d) above satisfy th	he red	quirements of se	ction		┌ Yes	┌ No
	In Part XIV, describe how the organization reports balance sheet, and include, if applicable, the text the organization's accounting for conservation eas	of the footnote to the o						
art	Complete if the organization answere				or Oth	er Similar	Assets.	
	If the organization elected, as permitted under SF art, historical treasures, or other similar assets he provide, in Part XIV, the text of the footnote to its	eld for public exhibition	n, edı	ucation or resea	rch ın fur			e,
_	If the organization elected, as permitted under SF historical treasures, or other similar assets held f provide the following amounts relating to these ite	or public exhibition, ed					•	
	(i) Revenues included in Form 990, Part VIII, line	e 1				► \$		
	(ii) Assets included in Form 990, Part X					► \$		
	If the organization received or held works of art, h following amounts required to be reported under S				for financ			
а	Revenues included in Form 990, Part VIII, line 1					► \$		

b Assets included in Form 990, Part X

Part	IIII Organizations Maintaining Co	llections of Art	<u>, His</u>	<u>tori</u>	<u>cal Tr</u>	<u>easu</u>	ires, or C	<u>)the</u>	r Similar A	sse	ts (co.	ntınued)
3	Using the organization's accession and other items (check all that apply)	r records, check any	√ of th	ie foll	-		_			ction		
а	Public exhibition		d	Γ	Loan	or excl	hange prog	rams				
b	Scholarly research		e	Γ	Other							
С	Preservation for future generations											
4	Provide a description of the organization's co	ollections and explai	ın hov	v they	/ furthe	r the c	organızatıor	ı's ex	cempt purpos	e in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								nılar	Γ,	Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an	ements. Comple	ete ıf	the o	organi	ızatıor			es" to Form	990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interme	diary	for co	ontribu	tions	or other ass	sets	not	Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the f	follow	/ıng ta	ıble		-					
							-		Α	mou	nt	
С	Beginning balance						Ļ	1 c				
d	Additions during the year						ļ	1d				
е	Distributions during the year						Ţ	1e				
f	Ending balance							1 f				
2a	Did the organization include an amount on Fo	orm 990, Part X, line	e 21?							Γ,	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	<u> </u>										
Pai	t V Endowment Funds. Complete											
4 -	Danis and a second a large	(a)Current Year	(b)	Prior Y	'ear	(c)⊤w	vo Years Back	(d)	Three Years Bacl	((e)	Four Ye	ars Back
1a	Beginning of year balance	 				<u> </u>		+		-		
b	Contributions	 				<u> </u>		+		+-		
С .	Investment earnings or losses							+				
d	Grants or scholarships	 				<u> </u>		+		+		
е	Other expenditures for facilities and programs					ĺ						
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held a										
а	Board designated or quasi-endowment											
b	Permanent endowment ►											
	Term endowment											
c 3a	Are there endowment funds not in the posses	ssion of the organiza	ation f	that a	ire helc	d and a	administere	d for	the			
	organization by										Yes	No
	(i) unrelated organizations									a(i)		
	(ii) related organizations								· · · -	a(ii)		
	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the							•	· · · L	3b		
4 Par	Land, Buildings, and Equipme											
reir	Lanu, bununys, and Equipme	int. See Fullii 99	<u>u, Pa</u>				(h)Cost	.+1	(0) 4			
	Description of property				Cost or		(b)Cost or obasis (oth		(c) Accumulat depreciatior		(d) Boo	ok value
	and		•	<u> </u>						_		
	Buildings		•	<u> </u>						_		
c l	easehold improvements		•	<u> </u>				3,988		805		72,183
d E	Equipment		•	<u> </u>			4,304	1,675	3,259,	021		1,045,654
e (Other			1			•		I	- 1		
	. Add lines 1a-1e (Column (d) should equal Fo								▶	_		L,117,837

Pari VIII Investments—Other Securities. See	Form 990, Part X, line 1.		
(a) Description of security or category	(b)Book value		od of valuation
(including name of security)	(5,2 5 1	Cost or end-of	f-year market value
(1)Financial derivatives			
(2)Closely-held equity interests			
(3)Other			
(A) RCCLP & SQUARE 181, INC	13,866,543		С
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line		
(a) Description of investment type	(b) Book value		d of valuation
	(2) 2001. Taila	Cost or end-of	f-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, In	ne 15.		
	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Irr	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	ne 15.		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	ne 15. ition 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Assets. See Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X	5.)		(b) Book value
Part IX Other Assets. See Form 990, Part X, Im (a) Descrip	ne 15. ition 5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	5.)		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.) 5.) 6. Jine 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	5.) 5.) 6. Jine 25. (b) A mount		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340	, , , , , , , , , , , ,	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340	.	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1 Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes RENTAL LIABILITIES	5.) (b) A mount 0 1,302,340		(b) Book value

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	65,887,818
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	59,042,922
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	6,844,896
4	Net unrealized gains (losses) on investments	4	-3,593,356
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	564,636
9	Total adjustments (net) Add lines 4 - 8	9	-3,028,720
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	3,816,176
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	eturn
1	Total revenue, gains, and other support per audited financial statements	1	65,499,171
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments 2a		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	714,819
3	Subtract line 2e from line 1	3	64,784,352
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 91,135		
Ь	Other (Describe in Part XIV)		
_ C	Add lines 4a and 4b	4c	1,103,466
5 Dow'	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	65,887,818
1	Reconciliation of Expenses per Audited Financial Statements With Expenses Total expenses and losses per audited financial	рег	58,062,761
-	statements	1	30,002,701
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	104,938
3	Subtract line 2e from line 1	3	57,957,823
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 91,135		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4 c	1,085,099
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	59,042,922

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information

Identifier	Return Reference	Explanation
PART X, LINE 2		EFFECTIVE FOR THE YEAR ENDED DECEMBER 31, 2009, CTIA IS SUBJECT TO THE FINANCIAL ACCOUNTING RULES FOR ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES THIS PRONOUNCEMENT PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT ATTRIBUTABLE FOR THE FINANCIAL STATEMENTS OF TAX POSITIONS TAKEN ON CTIA'S TAX RETURN THE EVALUATION OF A TAX POSITION IS A TWO-STEP PROCESS THE FIRST STEP IS RECOGNITION CTIA DETERMINES WHETHER IT IS MORE LIKELY THAN NOT THAT A TAX POSITION WILL BE SUSTAINED UPON EXAMINATION, INCLUDING RESOLUTION OF ANY RELATED APPEALS OR LITIGATION PROCESSES, BASED ON THE TECHNICAL MERITS OF THE POSITION IN EVALUATING WHETHER A TAX POSITION HAS MET THE MORE-LIKELY-THAN-NOT RECOGNITION WILL BE EXAMINED BY THE APPROPRIATE TAXING AUTHORITY THAT HAS FULL KNOWLEDGE OF ALL RELEVANT INFORMATION THE SECOND STEP IN THE EVALUATION PROCESS IS MEASUREMENT A TAX POSITION THAT MEETS THE MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD IS MEASURED TO DETERMINE THE AMOUNT OF BENEFIT TO RECOGNIZE IN THE FINANCIAL STATEMENTS CTIA HAS REVIEWED ALL OF ITS TAX POSITIONS TAKEN ON TAX RETURNS AND HAS CONCLUDED THAT NONE OF THE TAX POSITIONS FALL ABOVE THE MORE-LIKELY-THAN-NOT RECOGNITION THRESHOLD AS A RESULT, NO TAX LIABILITIES ARE RECORDED FOR THE YEARS ENDED DECEMBER 31, 2011 OR DECEMBER 31, 2010 RELATED TO THIS MATTER
PART XI, LINE 8		DEFERRED TAXES \$170,406, INCOME FROM SUBSIDIARIES \$499,167, EXPENSES FROM SUBSIDIARIES -\$104,938, ROUNDING \$1
PART XII, LINE 2D		INCOME FROM SUBSIDIARIES \$499,167, MEDICA RECLASSIFICATION \$215,652
PART XII, LINE 4B		EQUITY IN SUBSIDIARY \$1,012,814, LOSS ON DISPOSAL OF FIXED ASSET -\$483
PART XIII, LINE 2D		EXPENSES FROM SUBSIDIARIES \$104,938
PART XIII, LINE 4B		AMORTIZATION EXPENSE \$1,209,616, MEDICA RECLASSIFICATION -\$215,652

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As Filed Data -

DLN: 93493314020712

OMB No 1545-0047

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. ▶ See separate instructions.

Open to Public **Inspection**

Department of the Treasury Internal Revenue Service

Name of the organization

Employer identification number

CTI	A - THE WIRELESS ASSOCIATION	NC			52-1347628	
Pa	rt I General Informatio	n on Activiti	es Outside tl	he United States. C		zation answered
	"Yes" to Form 990, Pa					
1	For grantmakers. Does the					
	assistance, the grantees' elig		_			
	the grants or assistance?					│ Yes │ No
2	For grantmakers. Describe in Pa United States	art V the organiz	atıon's proceduı	res for monitoring the us	e of grant funds outside t	he
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)		
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	region (by type) (e g ,	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	South America	0	0	Program Services	CSC REGISTRY	44,911
3a	Sub-total	0	0			44,911
ŀ	Total from continuation sheets					

c Totals (add lines 3a and 3b)

Pai	Part IV,	line 15, for any	sistance to Organ recipient who recesspace is needed.	nizations or Entiti erved more than \$5,	es Outside the Ur ,000. Check this box	nited States. Comp x if no one recipient	plete if the organiza received more thai	tion answered "Yes' n \$5,000	' to Form 990, ▶ 厂
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
2	Enter total nur tax-exempt by	mber of recipie y the IRS, or fo	ent organizations lis or which the grante	ted above that are e or counsel has pro	recognized as chari ovided a section 50	ties by the foreign of 1(c)(3) equivalency	country, recognized letter	as . •	
3	Enter total nur	mber of other o	organizations or en	tities					(Form 990) 2011

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Use Part V if additional space is needed.

(a) Type of grant or assistance	ype of grant or issistance (b) Region (c) Number of recipients cash grant (d) Amount of disbursement (f) Amount of non-cash assistance assistance					(h) Method of valuation (book, FMV, appraisal, other)	
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Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	<u> </u>	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	্	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	┍	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	┍	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	~	No

Schedule F (Form 990) 2011

Identifier	ReturnReference	uctions) required in Part I, line 2, and any Explanation
		<u>'</u>
	1	

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Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. ► Attach to Form 990

OMB No 1545-0047

DLN: 93493314020712

Inspection

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

Name of the organization CTIA - THE WIRELESS ASSOCIATION Employer identification number

52-1347628

Part I General Information Does the organization maintain the selection criteria used to available Describe in Part IV the organization.	records to substantı ward the grants or as	ate the amount of the sıstance?			the grants or assist	ance, and	✓ Yes
Part II Grants and Other A Form 990, Part IV, Im Part IV and Schedule	ne 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000.	. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							
2 Enter total number of section 53 Enter total number of other orga						_	28
For Privacy Act and Paperwork Reductio				Cat No 50055P			le I (Form 990) 2011

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Identifier	Return Reference	Explanation
SCHEDULE I, PART I,		CTIA ONLY PROVIDES GRANT AND CONTRIBUTION ASSISTANCE TO ORGANIZATIONS WITHIN THE UNITED
LINE 2		STATES ANNUALLY CTIA WILL EVALUATE AN ORGANIZATION'S MISSION TO DETERMINE IF IT HAS THE SAME
		GOALS AND INITIATIVES AS CTIA ORGANIZATIONS DEEMED TO BE SIMILAR IN MISSION WILL BE CONSIDERED
		FOR FUTURE FUNDING ALL GRANT ASSISTANCE NEEDS TO BE SUBSTANTIATED IN ACCORDANCE WITH THE
		ACCOUNTING POLICY AND PROCEDURES MANUAL THIS POLICY REQUIRES 2 OR 3 LEVELS OF APPROVAL
		DEPENDING ON THE AMOUNT INVOLVED THE CRITERIA USED TO DETERMINE GRANTEES' ELIGIBILITY FOR
		GRANTS OR ASSISTANCE AWARDS REQUIRES RECIPIENT ORGANIZATIONS TO HAVE THE FOLLOWING SUPPORT
		GROUPS WHO HAVE LIKE MINDED VIEWS ON ISSUES THAT IMPACT THEIR GENERAL MEMBERSHIP FEDERAL
		EMPLOYER IDENTIFICATION NUMBER (EIN) MUST BE IN GOOD BUSINESS STANDING SUPPORT GENERAL
		CHARITABLE AND/OR EDUCATIONAL PURPOSES THE SELECTION CRITERIA USED TO AWARD GRANTS OR
		CONTRIBUTIONS IS BASED ON THE CTIA PROGRAM GOALS

Software ID: Software Version:

EIN: 52-1347628

Name: CTIA - THE WIRELESS ASSOCIATION

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
AMERICAN LEGISLATIVE EXCHANGE COUNCIL 1101 VERMONT AV NW WASHINGTON, DC 20005	52- 0140979	501(C)(3)	15,000				GENERAL SUPPORT
BLANCHETTE ROCKEFELLER NEUORSCIENCE INST8 MEDICAL CENTER DRIVE MORGANTOWN, WV 26505	55- 0771139	501(C)(3)	10,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CAPITOL HILL CLUB 300 FIRST STREET SE WASHINGTON, DC 20003	53- 0200565	501(C)(7)	10,000				GENERAL SUPPORT
CITY YEAR WASHINGTON DC 1875 CONNECTICUT AV WASHINGTON, DC 20009	22- 2882549	501(C)(3)	10,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
COALITION FOR A FISCALLY SOUND AMERICA888 16TH STREET NW WASHINGTON, DC 20006	45- 3770954	501(C)(4)	10,000				GENERAL SUPPORT
CONGRESSIONAL BLACK CAUCUS FOUNDATION1720 MASS AVE NW WASHINGTON, DC 20036	52- 1160561	501(C)(3)	10,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOUNDING FUND 1602 BELLE VIEW BLVD MCLEAN,VA 22101	27- 4185270	I 501(C)(4)	50,000				GENERAL SUPPORT
GEORGETOWN UNIVERSITY37TH AND O STREETS NW WASHINGTON, DC 20057	53- 0196603	501(C)(3)	50,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HEARING LOSS ASSOCIATION7910 WOODMONT AVE BETHESDA, MD 20814	52- 1177011	501(C)(3)	35,000				GENERAL SUPPORT
JOINT CENTER FOR POLITICAL AND ECONOMIC1090 VERMONT AV WASHINGTON, DC 200054928	52- 1069070	501(C)(3)	65,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	` '	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MID-AMERICA REGULATORY CONFERENCE500 E CAPITAL AVE PIERRE,SD 57501	43- 6053680	1 501(0)(6)	10,000				SPONSOR
MINORITY MEDIA AND TELECOMMUNICATIONS CNCL3636 16TH STREET NW WASHINGTON.DC 20010	52- 1880677	501(C)(3)	25,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MULIPLE MYELOMA RESEARCH FOUNDATION1316 ALEXANDRIA AVENUE ALEXANDRIA,VA 22308	26- 3835874	501(C)(3)	10,000				GENERAL SUPPORT
MYWIRELESSORG 1400 16TH STREET NW WASHINGTON,DC 20036	20- 2404168	501(C)(4)	1,407,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATL ASIAN PAC AMER CAUCUS OF ST LEGISLATORS 7700 EAST FIRST PLACE DENVER,CO 80230	84- 0772595		10,000				GENERAL SUPPORT
NATIONAL BLACK CAUCUS OF LOCAL ELECTED OFFS1301 PENN AVENUE NW WASHINGTON, DC	43- 1820088	501(C)(3)	10,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL BLACK CAUCUS OF STATE LEGISLATORS444 N CAPITAL ST NW WASHINGTON, DC 20001	52- 1218832	501(C)(3)	35,000				GENERAL SUPPORT
NATIONAL CONFERENCE OF BLACK MAYORS INC 191 PEACHTREE AVENUE ATLANTA, GA 30303	23- 7407671		10,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL CONFERENCE OF STATE LEGISLATURES444 N CAPITAL ST NW WASHINGTON, DC 20001	84- 0772595	501(C)(3)	193,947				SPONSOR
NATIONAL CONFERENCE OF STATE LEGISLATURES7700 EAST 1ST PLACE DENVER,CO 80230			20,000				SPONSOR

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL FOUNDATION FOR WOMEN LEGISLATORS910 16TH STREET NW WASHINGTON, DC 20006	52- 1480785	501(C)(3)	10,000				GENERAL SUPPORT
NATIONAL HISPANIC CAUCUS OF ST LEGISLATORS 444 N CAPITAL ST NW WASHINGTON, DC 20001	84- 1168319	501(C)(3)	25,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL LEAGUE OF CITIES1301 PENN AVE NW WASHINGTON, DC 20004	53- 0226780	1 501(6.1/4)	15,000				GENERAL SUPPORT
NATIONAL NETWORK TO END DOMESTIC VIOLENCE 2001 S STREET NW WASHINGTON, DC 20009	52- 1973408	501(C)(3)	10,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATL ORG OF BLACK ELECTED LEGISLATIVE WOMENPO BOX 7217 DENVER,CO 80207	95- 4546966	1 5017(3)(3)	15,000				GENERAL SUPPORT
NATIONAL TAXPAYERS UNION 108 N ALFRED ST ALEXANDRIA,VA 22314	52- 1009116	501(C)(4)	40,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NCSL FOUNDATION FOR STATE LEGISLATURES7700 EAST FIRST PLACE DENVER,CO 80230	74- 2232576	1 5017637	25,000				SPONSOR
NEW YORK LAW SCHOOL185 WEST BROADWAY NEW YORK, NY 10013	13- 5645885	501(C)(3)	50,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NG9-1-1 INSTITUTE 317 MASS AVE NE WASHINGTON, DC 20002	20- 0293876	501(C)(3)	10,000				GENERAL SUPPORT
NOBEL WOMENPO BOX 7217 DENVER,CO 80207	95- 4546966	501(C)(3)	25,000				SPONSOR

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
POLITIC365 LLC250 K STREET NE WASHINGTON, DC 20002	90- 0544495		20,000		· · · · · · · · · · · · · · · · · · ·		GENERAL SUPPORT
PUREHOPE800 COMPTON ROAD CINCINNATI,OH 45231	31- 1124344	501(C)(3)	15,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAUSCHENBERGER PARTNERS LLC551 TOLLGATE ROAD ELGIN,IL 60123	20- 5699359		15,000				GENERAL SUPPORT
SAFE INTERNET ALLIANCE1050 CONNECTICUT AV WASHINGTON, DC 20036	26- 4665353	501(C)(4)	10,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TECHNOLOGY POLICY INSTITUTE 1401 EYE STREET NW WASHINGTON, DC 20005	20- 5835776	501(C)(3)	12,500				GENERAL SUPPORT
THE CONGRESSIONAL CLUB2011 NEW HAMPSHIRE AV WASHINGTON, DC 20009	53- 0050970	501(C)(7)	20,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE COUNCIL OF STATE GOVERNMENTSPO BOX 11910 LEXINGTRON, KY 405781910	36- 6000818	501(C)(3)	6,000				GENERAL SUPPORT
THE FREE STATE FOUNDATIONPO BOX 60680 POTOMAC, MD 20859	74- 3160646	501(C)(3)	25,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal,	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
					other)		
THE HEARTLAND INSTITUTE19 SOUTH LASALLE STREET CHICAGO,IL 60603	36- 3309812	501(C)(3)	40,000				GENERAL SUPPORT
THE INFORMATION TECHNOLOGY & INNOVATION FDN 1101 K STREET NW WASHINGTON, DC 20005	20- 4403497	501(C)(3)	50,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE RIPON SOCIETY 1300 L STREET NW WASHINGTON, DC 20005	04- 2370356	501(C)(4)	25,000				GENERAL SUPPORT
THE TRUSTEES OF THE UNIV OF PENNSYLVANIA 3400 CHSTNT ST PHILADELPHIA, PA 191046204	23- 1352685	501(C)(3)	25,000				GENERAL SUPPORT

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THIRD WAY FOUNDATION1730 RHODE ISLD AV WASHINGTON, DC 20036	52- 1629221	501(C)(3)	25,000				GENERAL SUPPORT

DLN: 93493314020712

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990,

Part IV, question 23. ► Attach to Form 990. ► See separate instructions. Open to Public Inspection

Name of the organization CTIA - THE WIRELESS ASSOCIATION **Employer identification number**

52-1347628

Pa	rt I Questions Regarding Compensation	<u> </u>				
					Yes	No
1a	Check the appropriate box(es) if the organization pro 990, Part VII, Section A, line 1a Complete Part III					
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Γ	Payments for business use of personal residence			
	▼ Tax idemnification and gross-up payments	Γ	Health or social club dues or initiation fees			
	Discretionary spending account	<u> </u>	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the or reimbursement orprovision of all the expenses described.			1b	Yes	
2	Did the organization require substantiation prior to r officers, directors, trustees, and the CEO/Executive			2	Yes	
3	Indicate which, if any, of the following the organization organization organization.					
	Compensation committee	<u></u>	Written employment contract			
	Independent compensation consultant	고	Compensation survey or study			
	Form 990 of other organizations	굣	Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990, I or a related organization	Part VII	I, Section A, line $1 extstyle{a}$ with respect to the filing organization			
а	Receive a severance payment or change-of-control payment?					
b	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?					
C	Participate in, or receive payment from, an equity-ba	ased co	mpensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and pr	ovide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only mu	st comp	olete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A, compensation contingent on the revenues of	line 1a,	did the organization pay or accrue any			
а	The organization?			5a		
b	Any related organization?			5b		
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A, compensation contingent on the net earnings of	line 1a,	did the organization pay or accrue any			
а	The organization?			6a		
b	Any related organization?			6b		
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section A, payments not described in lines 5 and 6? If "Yes," of			7		
8	Were any amounts reported in Form 990, Part VII, p subject to the initial contract exception described in in Part III			8		
9	If "Yes" to line 8, did the organization also follow the section 53 4958-6(c)?	e rebutta	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
	(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) STEVE LARGENT (I)		300,000 0	1,044,031 0	332,052 0	60,997 0	2,698,778 0	
(2) MICHAEL (I) ALTSCHUL (II)	462,648 0	157,382 0	0	82,052 0	35,427 0	737,509 0	
(3) BOBBY FRANKLIN (I)	425,697 0	137,891 0	0	80,899 0	28,941 0	673,428 0	
(4) ROCCO CARLITTI (I)	250,567 0	66,025 0	0 0	82,052 0	25,928 0	424,572 0	
(5) ROBERT MESIROW (I)	337,768 0	113,847 0	0	31,069 0	27,423 0	510,107 0	
(6) JOHN WALLS (1)	350,185 0	75,784 0	0	32,052 0	30,666 0	488,687 0	
(7) JOT CARPENTER (I)	349,474 0	80,699 0	0	82,052	29,646 0	541,871 0	
(8) DAVID DIGGS (II)	264,091 0	63,447 0	0	30,351 0	28,771 0	386,660 0	
(9) CHRIS GUTTMAN- (1) MCCABE (11)	342,246 0	81,087 0	0	81,980 0	27,614 0	532,927 0	
(10) DANE K (I) SNO WDEN (II)		81,087 0	0	32,052 0	9,267 0	356,914 0	
(11) ROBERT ROCHE (I)	236,523	51,631 0	0	32,052	26,909 0	347,115 0	

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

4 <u></u>		
Identifier	Return Reference	Explanation
SCHEDULE J, LINE 1A		ALL CTIA EMPLOYEES RECEIVE STANDARD LIFE INSURANCE COVERAGE ADDITIONALLY, ALL EMPLOYEES WITH THE TITLE VICE PRESIDENT AND ABOVE RECEIVE ADDITIONAL LIFE INSURANCE COVERAGE IN EXCESS OF THE STANDARD AMOUNT THIS ADDITIONAL LIFE INSURANCE IS CONSIDERED TAXABLE INCOME TO THE EMPLOYEE IN ORDER TO OFFSET THE TAX IMPACT ON THIS ADDITIONAL BENEFIT, CTIA USES THE "GROSS UP" METHOD TO COVER THE TAXES FOR THE EMPLOYEES ANNUALLY, THE ASSOCIATION PROVIDES THE PRESIDENT/CEO AN EXECUTIVE PERQUISITE THESE PERQUISITES INCLUDE AN ALLOWANCE WHICH CAN BE USED FOR PROFESSIONAL MEMBERSHIP, TAX AND ACCOUNTING SERVICES THE ASSOCIATION INCLUDES THESE PERQUISITES IN THE EMPLOYEE'S TAXABLE WAGES (W-2)
SCHEDULE J, LINE 4B		THE FOLLOWING INDIVIDUALS PARTICIPATED IN A SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN FROM CTIA THE CONTRIBUTIONS TO THE SUPPLEMENTAL NON-QUALIFIED RETIREMENT PLAN ARE INCLUDED IN SCHEDULE J, PART II, COLUMN (C) AS PART OF DEFERRED COMPENSATION STEVE LARGENT - \$300,000 MIKE ALTSCHUL - \$50,000 BOBBY FRANKLIN - \$50,000 ROCCO CARLITTI - \$50,000 JOT CARPENTER - \$50,000 CHRIS GUTTMAN-MCCABE - \$50,000 STEVE LARGENT RECEIVED A 457(F) PAYOUT IN THE AMOUNT OF \$1,044,031 WHICH IS INCLUDED IN SCHEDULE J, PART II, COLUMN (BIII) AS PART OF OTHER REPORTABLE COMPENSATION

Schedule J (Form 990) 2011

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DLN: 93493314020712

OMB No 1545-0047

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information. ► Attach to Form 990 or 990-EZ.

Name of the organization CTIA - THE WIRELESS ASSOCIATION Employer identification number 52-1347628

		52-1347628
ldentifier	Return Reference	Explanation
PART III, LINE 4D		THE ASSOCIATION ADMINISTERS SEVERAL PRODUCT TESTING AND CERTIFICATION PROGRAMS INCLUDING PROGRAMS RELATING TO CERTAIN TYPES OF NEW WIRELESS PRODUCTS AND BATTERIES USED FOR WIRELESS TELEPHONES THESE PROGRAMS TEST CONSUMER WIRELESS PRODUCTS FOR CONFORMANCE TO ESTABLISHED INDUSTRY STANDARDS THEY PROVIDE THE WIRELESS INDUSTRY WITH AN UNBIASED, INDEPENDENT AND CENTRALIZED PRODUCT EVALUATION SERVICE
PART VI, LINE 6		THE ORGANIZATION HAS TWO CLASSES OF VOTING MEMBERS WIRELESS CARRIER MEMBERS AND SUPPLIER MEMBERS EACH CLASS OF VOTING MEMBERS HAS TWO OR MORE MEMBERSHIP CATEGORIES CTIA MAY ALSO HAVE NON-VOTING ASSOCIATE MEMBERS WHOSE RIGHTS ARE DETERMINED BY CTIA'S PRESIDENT
PART VI, LINE 7A		EACH WIRELESS CARRIER MEMBER AND SUPPLIER MEMBER, AND ITS MEMBER REPRESENTATIVE, SHALL HAVE THE RIGHT TO BE NOMINATED AND ELECTED BY THE MEMBERSHIP AND SERVE AS A MEMBER OF THE BOARD AND EXECUTIVE COMMITTEE. EACH LARGE CARRIER, MID-SIZED CARRIER, AND LARGE SUPPLIER SHALL BE ENTITLED TO APPOINT ONE DIRECTOR TO THE BOARD, SMALL CARRIER MEMBERS CAN ELECT NO MORE THAN NINE DIRECTORS TO THE BOARD, AND OTHER SUPPLIERS CAN ELECT NO MORE THAN EIGHT DIRECTORS TO THE BOARD
PART VI, LINE 11B		THE CTIA 2011 FORM 990 WAS PREPARED BY PRICEWATERHOUSECOOPERS AND REVIEWED BY MANAGEMENT AND CTIA'S AUDIT COMMITTEE. A COPY OF THE RETURN WAS PROVIDED TO CTIA'S BOARD OF DIRECTORS AND OFFICERS ALL MEMBERS OF THE GOVERNING BODY WERE GIVEN THE OPPORTUNITY TO REVIEW THE DOCUMENT ALL APPROPRIATE CHANGES WERE INCORPORATED IN THE FINAL DRAFT BEFORE SUBMISSION TO THE IRS
PART VI, LINE 12C		AT THE START OF EACH FISCAL YEAR, CTIA SEEKS TO ENSURE COMPLIANCE WITH THE CONFLICT OF INTEREST POLICY BY HAVING EMPLOYEES WITH DECISION-MAKING AUTHORITY OVER CTIA ACTIVITIES DISCLOSE ANY SITUATION OR AREAS OF ACTUAL OR POTENTIAL CONFLICTS OF INTEREST BY COMPLETING A DISCLOSURE STATEMENT DETAILING ANY PROFESSIONAL, BUSINESS, OR VOLUNTEER POSITION OR RESPONSIBILITIES THAT MIGHT GIVE RISE TO CONFLICTS IN ADDITION, ANNUALLY CTIA REQUESTS THAT EACH BOARD MEMBER DISCLOSE ANY POTENTIAL CONFLICTS OF INTEREST WITH RESPECT TO SERVING ON THE BOARD OF DIRECTORS WHEN CONFLICTS OR POTENTIAL CONFLICTS ARISE, THEY ARE EVALUATED BY THE GENERAL COUNSEL'S OFFICE WITH THE ASSISTANCE OF OUTSIDE LEGAL COUNSEL IF NECESSARY CONFLICTS ARE RESOLVED THROUGH COORDINATION WITH THE ASSOCIATION'S CEO, AND IF APPROPRIATE, CTIA'S BOARD CHAIRMAN
PART VI, LINES 15A & B		CTIA'S COMPENSATION COMMITTEE REVIEWS AND APPROVES THE COMPENSATION OF CTIA'S SENIOR MANAGEMENT THE COMMITTEE MEETS ANNUALLY AND CONSISTS OF UP TO SIX INDEPENDENT BOARD MEMBERS CTIA ENGAGES AN INDEPENDENT COMPENSATION CONSULTANT TO PROVIDE MARKET DATA FOR SIMILAR POSITIONS, ORGANIZATIONS AND INDUSTRY THE DECISIONS OF THE COMPENSATION COMMITTEE ARE CONTEMPORANEOUSLY SUBSTANTIATED BY THE APPROVAL OF MINUTES WITH THE TERMS OF THE CEO'S COMPENSATION BEING DETAILED IN AN EMPLOY MENT CONTRACT RESULTS OF THE COMPENSATION COMMITTEE ARE PROVIDED ANNUALLY TO THE BOARD OF DIRECTORS FOR KEY EMPLOYEES OF THE ORGANIZATION, CTIA PERFORMS AN ANNUAL MARKET ANALYSIS TO DETERMINE IF COMPENSATION IS COMPARABLE TO SIMILAR POSITIONS, ORGANIZATIONS AND INDUSTRIES
PART VI, LINE 19		CTIA MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO ITS MEMBERS, HOWEVER IT DOES NOT PROVIDE THIS INFORMATION TO THE GENERAL PUBLIC
PART XI, LINE 5		NET UNREALIZED LOSSES ON INVESTMENTS -\$3,593,356, DEFERRED TAXES \$170,406
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME STEVE LARGENT TITLE PRESIDENT/CEO HOURS 4
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME PHILIP CHRISTOPHER TITLE DIRECTOR HOURS 1
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME JOHNSON TITLE DIRECTOR HOURS 1
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME JEFF MILLER TITLE DIRECTOR (AS OF 7/2011) HOURS 1
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAMEMICHAEL ALTSCHUL TITLE SVP & GEN COUNSEL HOURS 2
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAME BOBBY FRANKLIN TITLE EXECUTIVE VP HOURS 2
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAMEJOHN WALLS TITLE VP, PUBLIC AFFAIRS HOURS 8
HOURS DEVOTED FOR RELATED ORGANIZATION	FORM 990 PART VII	NAMEJOT CARPENTER TITLE VP, GOVT AFFAIRS HOURS 2

Part I Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

DLN: 93493314020712

OMB No 1545-0047

Open to Public Inspection

SCHEDULE R (Form 990)

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37. ► Attach to Form 990. See separate instructions.

Related Organizations and Unrelated Partnerships

Department of the Treasury Internal Revenue Service

Name of the organization CTIA - THE WIRELESS ASSOCIATION **Employer identification number**

52-1347628

				,	•
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) CTIA INDEMNITY COMPANY LLC 1400 16TH STREET NW STE 600 WASHINGTON, DC 20036 26-1442352	CAPTIVE INSUR	DC	136,026	7,220,169	СТІА
(2) CTIA SPECTRUM CLEARINGHOUSE LLC 1400 16TH STREET NW STE 600 WASHINGTON, DC 20036 56-2615684	INFO CLRGHSE	DC	191,425	111,485	СТІА
(3) LATAM CSCA LLC 1400 16TH STREET NW STE 600 WASHINGTON, DC 20036 27-2279624	CSC REGISTRY	DC	253,781	37,890	СТІА
					·

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	Section 51 contr organi	12(b)(13) rolled
						Yes	No
(1) THE WIRELESS FOUNDATION							
1400 16TH STREET NW	CHARITBL SUPT	DC	501(C)(3)	11, TYPE II	СТІА	Yes	
WASHINGTON, DC 20036 52-1708229							
(2) MYWIRELESSORG							
1400 16TH STREET NW	GRASRTS ADVOC	DC	501(C)(4)		СТІА	Yes	
WASHINGTON, DC 20036 20-2404168							
For Privacy Act and Panenwork Reduction Act Notice see the Instructi	ons for Form 990	Cat No 50	11357		Schedule R (F	orm 990)	2011

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line	e 34
	because it had one or more related organizations treated as a partnership during the tax year.)	

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	, ·	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of- year assets			Disproprtionate		Disproprtionate		Disproprtionate		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No							
												i						

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Рптагу activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total Income	(g) Share of end-of-year assets	(h) Percentage ownership

r Other transfer of cash or property from related organization(s)

che	dule R (Form 990) 2011		Pε	age 3
Pai	Transactions With Related Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, 35A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		1	
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a	1	No
b	Gift, grant, or capital contribution to related organization(s)	1 b	Yes	
c	Gift, grant, or capital contribution from related organization(s)	1c		No
d	Loans or loan guarantees to or for related organization(s)	1d	Yes	
e	Loans or loan guarantees by related organization(s)	1e		No
f	Sale of assets to related organization(s)	1f		No
g	Purchase of assets from related organization(s)	1 g		No
h	Exchange of assets with related organization(s)	1h		No
i	Lease of facilities, equipment, or other assets to related organization(s)	1 i		No
		1:		No
-	Lease of facilities, equipment, or other assets from related organization(s)	1j 1k	Yes	
	Performance of services or membership or fundraising solicitations for related organization(s)	<u> </u>	165	
ı	Performance of services or membership or fundraising solicitations by related organization(s)	11	 	No
m	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1m	Yes	ـــــــ
n	Sharing of paid employees with related organization(s)	1n	Yes	-
		<u> </u>	₩	↓
	Reimbursement paid to related organization(s) for expenses	10		No
р	Reimbursement paid by related organization(s) for expenses	1р	 	No
q	Other transfer of cash or property to related organization(s)	1q		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of other organization	Transaction type(a-r)	(c) Amount involved	(d) Method of determining amount involved
(1) MYWIRELESSORG	В	1,407,000	GAAP
(2) THE WIRELESS FOUNDATION	к	75,000	GAAP
(3) MYWIRELESSORG	М	134,530	GAAP
(4) THE WIRELESS FOUNDATION	М	281,629	GAAP
(5) MYWIRELESSORG	N	615,348	GAAP
(6) THE WIRELESS FOUNDATION	N	714,164	GAAP

No

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	org	(e) Are all partners section 501(c)(3) janizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		Disproprtionate allocations?		amount in box 20 of Schedule K-1 (Form 1065)		j) eral or aging ener?	(k) Percentage ownership
			,	Yes	No			Yes	No		Yes	No			

Schedule R (Form 990) 2011

Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier Return Reference Explanation

Schedule R (Form 990) 2011

Software ID: Software Version:

EIN: 52-1347628

Name: CTIA - THE WIRELESS ASSOCIATION

Form 990, Schedule R, Part V - Transactions With Related Organizations

	(a) Name of other organization	(b) Transaction type(a-r)	(c) A mount I nvolved (\$)	(d) Method of determining amount involved
(1)	MYWIRELESSORG	В	1,407,000	GAAP
(2)	THE WIRELESS FOUNDATION	К	75,000	GAAP
(3)	MYWIRELESSORG	М	134,530	GAAP
(4)	THE WIRELESS FOUNDATION	М	281,629	GAAP
(5)	MYWIRELESSORG	N	615,348	GAAP
(6)	THE WIRELESS FOUNDATION	N	714,164	GAAP